

**TITLE V BLOCK GRANT APPLICATION**  
**FORMS (1-21)**  
**STATE: NV**  
**APPLICATION YEAR: 2006**

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- [FORM 1 - SF424](#)
- [FORM 2 - MCH BUDGET DETAILS](#)
- [FORM 3 - STATE MCH FUNDING PROFILE](#)
- [FORM 4 - BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED AND SOURCES OF FEDERAL FUNDS](#)
- [FORM 5 - STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES](#)
- [FORM 6 - NUMBER AND PERCENTAGE OF NEWBORN AND OTHERS SCREENED, CASE CONFIRMED, AND TREATED](#)
- [FORM 7 - NUMBER OF INDIVIDUALS SERVED \(UNDULICATED\) UNDER TITLE V](#)
- [FORM 8 - DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE XIX](#)
- [FORM 9 - STATE MCH TOLL-FREE TELEPHONE LINE DATA](#)
- [FORM 10 - TITLE V MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT STATE PROFILE FOR FY 2004](#)
- [FORM 11 - NATIONAL AND STATE PERFORMANCE MEASURES](#)
- [FORM 12 - NATIONAL AND STATE OUTCOME MEASURES](#)
- [FORM 13 - CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CHILDREN WITH SPECIAL HEALTH CARE NEEDS](#)
- [FORM 14 - LIST OF MCH PRIORITY NEEDS](#)
- [FORM 15 - TECHNICAL ASSISTANCE \(TA\) REQUEST AND TRACKING](#)
- [FORM 16 - STATE PERFORMANCE/OUTCOME MEASURE DETAIL SHEETS](#)
- [FORM 17 - HEALTH SYSTEM CAPACITY INDICATORS \(01 THROUGH 04,07,08\) - MULTI-YEAR DATA](#)
- [FORM 18](#)
  - [MEDICAID AND NON-MEDICAID COMPARISON](#)
  - [MEDICAID ELIGIBILITY LEVEL \(HSCI 06\)](#)
  - [SCHIP ELIGIBILITY LEVEL \(HSCI 06\)](#)
- [FORM 19](#)
  - [GENERAL MCH DATA CAPACITY \(HSCI 09A\)](#)
  - [ADOLESCENT TOBACCO USE DATA CAPACITY \(HSCI 09B\)](#)
  - [OVERWEIGHT AND OBESITY DATA CAPACITY \(HSCI 09C\)](#)
- [FORM 20 - HEALTH STATUS INDICATORS 01-05 - MULTI-YEAR DATA](#)
- [FORM 21](#)
  - [POPULATION DEMOGRAPHICS DATA \(HSI 06\)](#)
  - [LIVE BIRTH DEMOGRAPHICS DATA \(HSI 07\)](#)
  - [INFANT AND CHILDREN MORTALITY DATA \(HSI 08\)](#)
  - [MISCELLANEOUS DEMOGRAPHICS DATA \(HSI 09\)](#)
  - [GEOGRAPHIC LIVING AREA DEMOGRAPHIC DATA \(HSI 10\)](#)
  - [POVERTY LEVEL DEMOGRAPHIC DATA \(HSI 11\)](#)
  - [POVERTY LEVEL FOR CHILDREN DEMOGRAPHICS DATA \(HSI 12\)](#)
- [NEW STATE PERFORMANCE AND OUTCOME MEASURES FOR NEW NEEDS ASSESSMENT PERIOD](#)

<b>APPLICATION FOR FEDERAL ASSISTANCE</b>		2. DATE SUBMITTED	APPLICANT IDENTIFIER
1. TYPE OF SUBMISSION:		3. DATE RECEIVED BY STATE	STATE APPLICATION IDENTIFIER
Application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction	Pre-application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction	4. DATE RECEIVED BY FEDERAL AGENCY	FEDERAL IDENTIFIER <b>886000022</b>
5. APPLICANT INFORMATION			
Legal Name: <b>NV Dept. of Human Resources</b>		Organizational Unit: <b>State Health Division</b>	
Address (give city, county, state and zip code) <b>3427 Goni Road Suite 108 Carson City, NV 89706 County: Carson</b>		Name and telephone number of the person to be contacted on matters involving this application (give area code) Name: <b>Judith M. Wright</b> Tel Number: <b>775-684-4285</b>	
6. EMPLOYER IDENTIFICATION NUMBER (EIN): <div style="border: 1px solid black; padding: 2px; display: inline-block;">886000022</div>		7. TYPE OF APPLICANT: (Enter appropriate letter in box) <b>A</b> A. State                      H. Independent School District B. County                    I. State Controlled Institution of Higher Learning C. Municipality              J. Private University D. Township                K. Indian Tribe E. Interstate                L. Individual F. Intermunicipality        M. Profit Organization G. Special District        N. Other (Specify)	
8. TYPE OF APPLICATION: <input type="checkbox"/> New <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Revision If Revision, enter appropriate letter(s) in box(es) <input type="checkbox"/> <input type="checkbox"/> A. Increase Award   B. Decrease Award   C. Increase Duration Decrease Duration Other (specify):		9 NAME OF FEDERAL AGENCY: <b>Health Resources and Services Administration, Maternal and Child Health Bureau</b>	
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: <div style="border: 1px solid black; padding: 2px; display: inline-block;">93994</div> TITLE: <b>Maternal and Child Health Services Block Grant</b>		11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT: <b>Maternal and Child Health Services</b>	
12. AREAS AFFECTED BY PROJECT (cities, communities, states, etc.): <b>Statewide</b>			
13. PROPOSED PROJECT:		14. CONGRESSIONAL DISTRICTS OF:	
Start Date: <b>10/01/2005</b>	Ending Date: <b>09/30/2006</b>	a. Applicant <b>1st, 2nd, and 3rd Distric</b>	b. Project <b>1st, 2nd, and 3rd Distric</b>
15. ESTIMATED FUNDING:		16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?	
a. Federal	\$ <u>1,976,405.00</u>	a. YES, THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON DATE: b. NO <input checked="" type="checkbox"/> PROGRAM IS NOT COVERED BY E.O. 12372 <input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW	
b. Applicant	\$ <u>150,000.00</u>		
c. State	\$ <u>1,482,304.00</u>		
d. Local	\$ <u>0.00</u>		
e. Other	\$ <u>0.00</u>		
f. Program Income	\$ <u>0.00</u>		
g. TOTAL	\$ <u>3,608,709.00</u>	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT <input type="checkbox"/> Yes. If "Yes", attach an explanation <input checked="" type="checkbox"/> No	
18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY BY THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.			
a. Typed Name of Authorized Representative <b>Alex Haartz</b>		b. Title <b>Administrator</b>	c. Telephone Number <b>775-684-4200</b>
d. Signature of Authorized Representative		e. Date Signed	

**FORM 2**  
**MCH BUDGET DETAILS FOR FY 2006**

[Secs. 504 (d) and 505(a)(3)(4)]

**STATE: NV**

**1. FEDERAL ALLOCATION**

(Item 15a of the Application Face Sheet [SF 424])  
Of the Federal Allocation (1 above), the amount earmarked for:

\$ 1,976,405

A.Preventive and primary care for children:

\$ 592,922 ( 30 %)

B.Children with special health care needs:

\$ 592,922 ( 30 %)

(If either A or B is less than 30%, a waiver request must accompany the application)[Sec. 505(a)(3)]

C.Title V administrative costs:

\$ 197,640 ( 10 %)

(The above figure cannot be more than 10% )[Sec. 504(d)]

**2. UNOBLIGATED BALANCE** (Item 15b of SF 424)

\$ 150,000

**3. STATE MCH FUNDS** (Item 15c of the SF 424)

\$ 1,482,304

**4. LOCAL MCH FUNDS** (Item 15d of SF 424)

\$ 0

**5. OTHER FUNDS** (Item 15e of SF 424)

\$ 0

**6. PROGRAM INCOME** (Item 15f of SF 424)

\$ 0

**7. TOTAL STATE MATCH** (Lines 3 through 6)

(Below is your State's FY 1989 Maintenance of Effort Amount)

\$ 853,034

\$ 1,482,304

**8. FEDERAL-STATE TITLE V BLOCK GRANT PARTNERSHIP (SUBTOTAL)**

(Total lines 1 through 6. Same as line 15g of SF 424)

\$ 3,608,709

**9. OTHER FEDERAL FUNDS**

(Funds under the control of the person responsible for the administration of the Title V program)

a. SPRANS: \$ 0

b. SSDI: \$ 100,000

c. CISS: \$ 178,466

d. Abstinence Education: \$ 286,164

e. Healthy Start: \$ 0

f. EMSC: \$ 0

g. WIC: \$ 44,489,283

h. AIDS: \$ 0

i. CDC: \$ 866,568

j. Education: \$ 0

k. Other: \$ 0

Other - See Notes \$ 552,544

Real Choices \$ 751,434

**10. OTHER FEDERAL FUNDS** (SUBTOTAL of all Funds under item 9)

\$ 47,224,459

**11. STATE MCH BUDGET TOTAL**

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 50,833,168

## FORM NOTES FOR FORM 2

None

### FIELD LEVEL NOTES

1. **Section Number:** Main

**Field Name:** WIC

**Row Name:** Other Federal Funds - WIC

**Column Name:**

**Year:** 2006

**Field Note:**

The amount for WIC includes the Legislative Approved budget amount of \$44,489,283, which is an increase of \$7,246,174 from the FY 05 application. Caseload growth is the primary reason for the anticipated increased expenditures. This is an increase of 19.5% and is the result of Nevada continuing to be the fastest growing state in terms of population growth. The WIC budget is funded primarily by revenues from the U.S. Department of Agriculture and rebates from food manufacturers for infant formula and cereal.

2. **Section Number:** Main

**Field Name:** CDC

**Row Name:** Other Federal Funds - CDC

**Column Name:**

**Year:** 2006

**Field Note:**

Programs funded by grants from the CDC include Rape Prevention and Education (\$290,253), Oral Health (\$450,000) and Core Injury Prevention (\$126,315).

3. **Section Number:** Main

**Field Name:** OtherFedFundsOtherFund

**Row Name:** Other Federal Funds - Other Funds

**Column Name:**

**Year:** 2006

**Field Note:**

Other federal grants within the MCH program include Children's Oral Health (HRSA \$65,000), Primary Care (BPHC \$212,056), SEARCH (BPHC \$152,000), Newborn Hearing Screening (HRSA \$77,016), and Rape Prevention and Education (PHHS \$46,472).

The Real Choices Systems Change grant is from CMS.

**FORM 3**  
**STATE MCH FUNDING PROFILE**

*[Secs. 505(a) and 506(a)(1-3)]*

**STATE: NV**

	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> <i>(Line1, Form 2)</i>	\$ 2,154,866	\$ 1,614,364	\$ 1,996,035	\$ 0	\$ 1,976,405	\$ 0
<b>2. Unobligated Balance</b> <i>(Line2, Form 2)</i>	\$ 150,000	\$ 0	\$ 150,000	\$ 0	\$ 150,000	\$ 0
<b>3. State Funds</b> <i>(Line3, Form 2)</i>	\$ 1,616,150	\$ 1,210,773	\$ 1,497,027	\$ 0	\$ 1,482,304	\$ 0
<b>4. Local MCH Funds</b> <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>5. Other Funds</b> <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>6. Program Income</b> <i>(Line6, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>7. Subtotal</b> <i>(Line8, Form 2)</i>	\$ 3,921,016	\$ 2,825,137	\$ 3,643,062	\$ 0	\$ 3,608,709	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> <i>(Line10, Form 2)</i>	\$ 37,225,573	\$ 39,157,753	\$ 39,489,037	\$ 0	\$ 47,224,459	\$ 0
<b>9. Total</b> <i>(Line11, Form 2)</i>	\$ 41,146,589	\$ 41,982,890	\$ 43,132,099	\$ 0	\$ 50,833,168	\$ 0
(STATE MCH BUDGET TOTAL)						

**FORM 3**  
**STATE MCH FUNDING PROFILE**

*[Secs. 505(a) and 506(a)(1-3)]*

**STATE: NV**

	FY 2001		FY 2002		FY 2003	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> <i>(Line1, Form 2)</i>	\$ 1,545,737	\$ 1,895,045	\$ 1,545,737	\$ 1,456,330	\$ 1,587,216	\$ 1,536,682
<b>2. Unobligated Balance</b> <i>(Line2, Form 2)</i>	\$ 507,988	\$ 0	\$ 150,000	\$ 0	\$ 150,000	\$ 0
<b>3. State Funds</b> <i>(Line3, Form 2)</i>	\$ 1,159,303	\$ 1,421,284	\$ 1,159,303	\$ 1,242,248	\$ 1,190,412	\$ 1,152,512
<b>4. Local MCH Funds</b> <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>5. Other Funds</b> <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>6. Program Income</b> <i>(Line6, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>7. Subtotal</b> <i>(Line8, Form 2)</i>	\$ 3,213,028	\$ 3,316,329	\$ 2,855,040	\$ 2,698,578	\$ 2,927,628	\$ 2,689,194
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> <i>(Line10, Form 2)</i>	\$ 21,438,271	\$ 30,144,739	\$ 32,093,173	\$ 32,332,245	\$ 31,788,074	\$ 32,862,500
<b>9. Total</b> <i>(Line11, Form 2)</i>	\$ 24,651,299	\$ 33,461,068	\$ 34,948,213	\$ 35,030,823	\$ 34,715,702	\$ 35,551,694
(STATE MCH BUDGET TOTAL)						

## FORM NOTES FOR FORM 3

None

### FIELD LEVEL NOTES

1. **Section Number:** Main  
**Field Name:** FedAllocExpended  
**Row Name:** Federal Allocation  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The amount budgeted (\$2,154,866) was overstated from the amount actually awarded and available for FY 04. The award for FFY 03 was \$1,581,541 and the award for FFY 04 was \$1,996,035. Nevada state authority requirements are time consuming and there were delays in implementing programs to utilize the additional revenues available. This will not be a recurring problem as sufficient state expenditure authority is built in to the respective budgets.
2. **Section Number:** Main  
**Field Name:** UnobligatedBalanceExpended  
**Row Name:** Unobligated Balance  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
The budget is built to retain a \$150,000 carry forward amount each year to allow flexibility for expenditure purposes in any given state fiscal year.
3. **Section Number:** Main  
**Field Name:** UnobligatedBalanceExpended  
**Row Name:** Unobligated Balance  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The budget is built to retain a \$150,000 carry forward each year to allow flexibility for expenditure purposes in any given state fiscal year.
4. **Section Number:** Main  
**Field Name:** StateMCHFundsExpended  
**Row Name:** State Funds  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
State expenditures followed the lower expenditure levels for the federal portion of the MCH program. The State maintains a \$3 State expenditure for each \$4 federal expenditure. Federal expenditures of \$1,614,364 were matched with \$1,210,773 of State expenditures for FY 04.

**FORM 4**

**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**

[Secs 506(2)(2)(iv)]

**STATE: NV**

	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 1,235,176	\$ 1,148,043	\$ 1,446,253	\$ 0	\$ 1,432,657	\$ 0
b. Infants < 1 year old	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
c. Children 1 to 22 years old	\$ 1,235,177	\$ 722,686	\$ 929,734	\$ 0	\$ 920,220	\$ 0
d. Children with Special Healthcare Needs	\$ 1,235,177	\$ 758,694	\$ 1,067,472	\$ 0	\$ 1,058,192	\$ 0
e. Others	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
f. Administration	\$ 215,486	\$ 195,714	\$ 199,603	\$ 0	\$ 197,640	\$ 0
g. SUBTOTAL	\$ 3,921,016	\$ 2,825,137	\$ 3,643,062	\$ 0	\$ 3,608,709	\$ 0
<b>II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).</b>						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 100,000		\$ 100,000		\$ 100,000	
c. CISS	\$ 0		\$ 100,000		\$ 178,466	
d. Abstinence Education	\$ 286,165		\$ 286,164		\$ 286,164	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 35,129,209		\$ 37,243,109		\$ 44,489,283	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 766,538		\$ 802,753		\$ 866,568	
j. Education	\$ 0		\$ 0		\$ 0	
k. Other						
Other - See Notes	\$ 0		\$ 587,498		\$ 552,544	
Real Choices	\$ 0		\$ 369,513		\$ 751,434	
CMS-Real Choices	\$ 369,513		\$ 0		\$ 0	
PHHS	\$ 46,470		\$ 0		\$ 0	
Primary Health Care	\$ 527,678		\$ 0		\$ 0	
<b>III. SUBTOTAL</b>	\$ 37,225,573		\$ 39,489,037		\$ 47,224,459	

**FORM 4**

**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**

[Secs 506(2)(2)(iv)]

**STATE: NV**

	FY 2001		FY 2002		FY 2003	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 833,478	\$ 767,217	\$ 807,497	\$ 980,765	\$ 1,102,329	\$ 1,044,069
b. Infants < 1 year old	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
c. Children 1 to 22 years old	\$ 1,391,500	\$ 1,088,893	\$ 817,217	\$ 727,472	\$ 833,289	\$ 688,366
d. Children with Special Healthcare Needs	\$ 833,478	\$ 1,294,835	\$ 1,075,754	\$ 834,590	\$ 833,289	\$ 778,997
e. Others	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
f. Administration	\$ 154,572	\$ 165,384	\$ 154,572	\$ 155,750	\$ 158,721	\$ 177,762
g. SUBTOTAL	\$ 3,213,028	\$ 3,316,329	\$ 2,855,040	\$ 2,698,577	\$ 2,927,628	\$ 2,689,194
<b>II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).</b>						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 100,000		\$ 100,000		\$ 94,111	
c. CISS	\$ 0		\$ 0		\$ 0	
d. Abstinence Education	\$ 157,534		\$ 157,534		\$ 157,534	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 20,523,775		\$ 29,379,000		\$ 29,379,000	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 260,272		\$ 889,474		\$ 430,632	
j. Education	\$ 0		\$ 554,949		\$ 702,216	
k. Other						
BPHC	\$ 212,056		\$ 357,056		\$ 364,056	
HRSA/Quentin Burdick	\$ 0		\$ 0		\$ 160,525	
TANF	\$ 0		\$ 500,000		\$ 500,000	
HRSA	\$ 0		\$ 155,160		\$ 0	
SEARCH	\$ 184,634		\$ 0		\$ 0	
<b>III. SUBTOTAL</b>	\$ 21,438,271		\$ 32,093,173		\$ 31,788,074	

## FORM NOTES FOR FORM 4

None

### FIELD LEVEL NOTES

1. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** PregWomenBudgeted  
**Row Name:** Pregnant Women  
**Column Name:** Budgeted  
**Year:** 2006  
**Field Note:**  
The amount budgeted for FY 06 is the percentage of expenditures for this population divided by the total budgeted expenditures for FY 05. The percentage for FY 05 is 39.7%. ( $\$3,608,709 \times .397 = \$1,432,657$ ).
2. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_1\_22Budgeted  
**Row Name:** Children 1 to 22 years old  
**Column Name:** Budgeted  
**Year:** 2006  
**Field Note:**  
The amount budgeted for FY 06 is the percentage of expenditures for this population divided by the total budgeted expenditures for FY 05. The percentage for FY 05 is 25.5%. ( $\$3,608,709 \times .255 = \$920,220$ ).
3. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_1\_22Expended  
**Row Name:** Children 1 to 22 years old  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Expenditures did not meet the budgeted amount, but did meet the minimum requirements of 30% for expenditures for this population.
4. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_1\_22Expended  
**Row Name:** Children 1 to 22 years old  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
Budgeted expenditures for this population were straight-lined at 30% of the anticipated grant award. Expenditures did not meet the budgeted amounts, but do meet the minimum requirements of 30% for expenditures for this population.
5. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** CSHCNBudgeted  
**Row Name:** CSHCN  
**Column Name:** Budgeted  
**Year:** 2006  
**Field Note:**  
The amount budgeted for FY 06 is the percentage of expenditures for this population divided by the total budgeted expenditures for FY 05. The percentage for FY 05 is 29.3%. ( $\$3,608,709 \times .255 = \$1,057,352$ ). This budget total is rounded up by \$840 to match the grant application total.
6. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** CSHCNExpended  
**Row Name:** CSHCN  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Expenditures did not meet the budgeted amount, but did meet the minimum requirements of 30% for expenditures for this population.
7. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** CSHCNExpended  
**Row Name:** CSHCN  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
Budgeted expenditures for this population were straight-lined at 30% of the anticipated grant award. Expenditures did not meet the budgeted amounts, but do meet the minimum requirements of 30% for expenditures for this population.
8. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** AdminBudgeted  
**Row Name:** Administration  
**Column Name:** Budgeted  
**Year:** 2005  
**Field Note:**  
10% of grant total will be drawn for Administration expenditures within the allowance of the grant.
9. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** AdminBudgeted  
**Row Name:** Administration  
**Column Name:** Budgeted  
**Year:** 2006  
**Field Note:**  
Administrative expenditures are 10% of the grant application total request.
10. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** AdminExpended  
**Row Name:** Administration  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Administrative costs remained within the 10% limit for the grant. The appearance of the overrun is due to the overlapping of federal fiscal year with the state fiscal year.

**FORM 5**  
**STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES**

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

**STATE: NV**

TYPE OF SERVICE	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 1,686,037	\$ 1,170,545	\$ 1,384,364	\$ 0	\$ 1,494,006	\$ 0
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 744,993	\$ 572,943	\$ 837,904	\$ 0	\$ 732,568	\$ 0
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 1,097,884	\$ 756,522	\$ 1,109,191	\$ 0	\$ 967,134	\$ 0
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 392,102	\$ 325,127	\$ 311,603	\$ 0	\$ 415,001	\$ 0
<b>V. Federal-State Title V Block Grant Partnership Total</b> (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 3,921,016	\$ 2,825,137	\$ 3,643,062	\$ 0	\$ 3,608,709	\$ 0

**FORM 5**  
**STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES**

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

**STATE: NV**

TYPE OF SERVICE	FY 2001		FY 2002		FY 2003	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 1,623,520	\$ 1,946,685	\$ 1,513,171	\$ 1,167,243	\$ 1,718,518	\$ 1,018,179
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 402,281	\$ 991,582	\$ 770,861	\$ 505,310	\$ 875,361	\$ 623,936
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 587,227	\$ 89,541	\$ 342,605	\$ 753,171	\$ 79,046	\$ 761,622
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 600,000	\$ 288,521	\$ 228,403	\$ 272,854	\$ 254,703	\$ 285,457
<b>V. Federal-State Title V Block Grant Partnership Total</b> (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 3,213,028	\$ 3,316,329	\$ 2,855,040	\$ 2,698,578	\$ 2,927,628	\$ 2,689,194

## FORM NOTES FOR FORM 5

None

### FIELD LEVEL NOTES

- 1. Section Number:** Main  
**Field Name:** DirectHCBudgeted  
**Row Name:** Direct Health Care Services  
**Column Name:** Budgeted  
**Year:** 2005  
**Field Note:**  
The budget for Direct Services in FY 05 includes budgeted amount for Early Intervention Services (\$455,799), payments to medical providers for CSHCN clients (\$186,814 projected), the genetics contract (\$66,500), and the craniofacial contract (\$14,643). Other expenditures are projected for salaries and fringe benefits, nursing services in rural counties of Nevada and health clinics in Clark and Washoe Counties. The total amount budgeted for Direct Services in FY 05 is \$1,384,364.
- 2. Section Number:** Main  
**Field Name:** DirectHCBudgeted  
**Row Name:** Direct Health Care Services  
**Column Name:** Budgeted  
**Year:** 2006  
**Field Note:**  
The amount budgeted for FY 06 is the percentage of expenditures for this population divided by the total expenditures for FY 04. The percentage for FY 04 is 41.4%.  
 $(\$3,608,709 \times .414 = \$1,494,006)$ .
- 3. Section Number:** Main  
**Field Name:** DirectHCExpended  
**Row Name:** Direct Health Care Services  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Expenditures of \$1,018,179 were below the budgeted amount of \$1,718,518 by \$700,339. This variance is due primarily to past practice of state expenditures for Newborn Screening (\$648,896) being reported as a Direct Health Care Service. This report includes Newborn Screening expenditures with Population Based Services.
- 4. Section Number:** Main  
**Field Name:** DirectHCExpended  
**Row Name:** Direct Health Care Services  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The budget amount for SF 2004 exceeded the grant award available funds for this period. The budget amount is based on an award of \$2,154,866, while the federal award for FFY 03 was \$1,581,541 and for FFY 04 \$1,996,035. The expenditures of \$1,170,545 for Direct Services are consistent with historical expenditures for the given expenditure level.
- 5. Section Number:** Main  
**Field Name:** EnablingBudgeted  
**Row Name:** Enabling Services  
**Column Name:** Budgeted  
**Year:** 2005  
**Field Note:**  
The budget for Enabling Services in FY 05 includes salary and benefits for FTE's and a new prenatal campaign designed to improve access for pregnant women to early prenatal care. Health Division will enter into contractual arrangements with local agencies statewide to provide prenatal care and referrals to other agencies for additional services needed by pregnant women.
- 6. Section Number:** Main  
**Field Name:** EnablingBudgeted  
**Row Name:** Enabling Services  
**Column Name:** Budgeted  
**Year:** 2006  
**Field Note:**  
The amount budgeted for FY 06 is the percentage of expenditures for this population divided by the total expenditures for FY 04. The percentage for FY 04 is 20.3%.  
 $(\$3,608,709 \times .203 = \$732,568)$ .
- 7. Section Number:** Main  
**Field Name:** EnablingExpended  
**Row Name:** Enabling Services  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Expenditures in FY03 of \$623,936 were below the budgeted amount of \$875,361 by \$251,425. Reporting parameters for FY 03 were unchanged from FY 02 and the expenditures were unable to meet the optimistic budgeted amount for FY 03. Expenditures for FY 03 were \$118,626 above the amount expended for Enabling Services in FY 02.
- 8. Section Number:** Main  
**Field Name:** EnablingExpended  
**Row Name:** Enabling Services  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The budget amount for SF 2004 exceeded the grant award available funds for this period. The budget amount is based on an award of \$2,154,866, while the federal award for FFY 03 was \$1,581,541 and for FFY 04 \$1,996,035. The expenditures of \$572,943 for Enabling Services are consistent with historical expenditures for the given expenditure level.
- 9. Section Number:** Main  
**Field Name:** PopBasedBudgeted  
**Row Name:** Population-Based Services  
**Column Name:** Budgeted  
**Year:** 2005  
**Field Note:**  
The budget for Population-Based Services in FY 05 includes newborn screening services and an MCH referral campaign (replacing the Baby Your Baby campaign) that will utilize new material produced by other grant funded projects (ie Real Choices funded by a CMS grant) to provide assistance to and improve access to health care and other services for women, children and adolescents.

The newborn screening expenditures will more than double in FY 05 due to higher costs of the laboratory testing contract and expanded scope of work, testing for 23 anomalies, utilizing tandem mass spectrometry technology.

10. **Section Number:** Main  
**Field Name:** PopBasedBudgeted  
**Row Name:** Population-Based Services  
**Column Name:** Budgeted  
**Year:** 2006  
**Field Note:**  
The amount budgeted for FY 06 is the percentage of expenditures for this population divided by the total expenditures for FY 04. The percentage for FY 04 is 26.8%.  
(\$3,608,709 X .268 = \$967,134.
- Newborn screening services reported under Population-Based Services tests for 31 anomalies, utilizing tandem mass spectrometry technology that was implemented in 2004.
11. **Section Number:** Main  
**Field Name:** PopBasedExpended  
**Row Name:** Population-Based Services  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Expenditures for Population-Based Services in FY 03 amounted to \$761,622 compared to the budgeted amount of \$79,046. This variance amounts to \$682,216. FY 03 expenditures include newborn screening that was previously budgeted as Direct Services. In addition to the newborn screening services, salaries and benefits of FTE's are prorated to Population-Based Services.
12. **Section Number:** Main  
**Field Name:** PopBasedExpended  
**Row Name:** Population-Based Services  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The budget amount for SF 2004 exceeded the grant award available funds for this period. The budget amount is based on an award of \$2,154,866, while the federal award for FFY 03 was \$1,581,541 and for FFY 04 \$1,996,035. The expenditures of \$756,522 for Population-Based Services are consistent with historical expenditures for the given expenditure level.
13. **Section Number:** Main  
**Field Name:** InfrastrBuildBudgeted  
**Row Name:** Infrastructure Building Services  
**Column Name:** Budgeted  
**Year:** 2005  
**Field Note:**  
The budget for Infrastructure Building Services in FY 05 includes 100% of Administrative charges (\$199,603) and salaries and benefits for FTE's estimated to total \$112,000 in FY 05. Total budget amount for Infrastructure Building Services in FY 05 is \$311,603.
14. **Section Number:** Main  
**Field Name:** InfrastrBuildBudgeted  
**Row Name:** Infrastructure Building Services  
**Column Name:** Budgeted  
**Year:** 2006  
**Field Note:**  
The amount budgeted for FY 06 is the percentage of expenditures for this population divided by the total expenditures for FY 04. The percentage for FY 04 is 11.5%.  
(\$3,608,709 X .115 = \$415,001.
15. **Section Number:** Main  
**Field Name:** InfrastrBuildExpended  
**Row Name:** Infrastructure Building Services  
**Column Name:** Expended  
**Year:** 2003  
**Field Note:**  
Expenditures for Infrastructure Building Services amount to \$285,457 compared to the budgeted amount of \$254,703. The variance amounts to \$30,754. In past years the budget included only a portion of Administration expenditures (10%) for Infrastructure Building Services. The reporting period for FY 03 includes 100% of Administrative expenditures as Infrastructure Building Services.
16. **Section Number:** Main  
**Field Name:** InfrastrBuildExpended  
**Row Name:** Infrastructure Building Services  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The budget amount for SF 2004 exceeded the grant award available funds for this period. The budget amount is based on an award of \$2,154,866, while the federal award for FFY 03 was \$1,581,541 and for FFY 04 \$1,996,035. The expenditures of \$325,127 for Infrastructure Building Services are consistent with historical expenditures for the given expenditure level.

**FORM 6**

**NUMBER AND PERCENTAGE OF NEWBORNS AND OTHERS SCREENED, CASES CONFIRMED, AND TREATED**

*Sect. 506(a)(2)(B)(iii)*

**STATE: NV**

**Total Births by Occurrence:** 34,730

**Reporting Year: 2004**

Type of Screening Tests	(A) Receiving at least one Screen (1)		(B) No. of Presumptive Positive Screens	(C) No. Confirmed Cases (2)	(D) Needing Treatment that Received Treatment(3)	
	No.	%			No.	%
Phenylketonuria	34,384	99	5	1	1	100
Congenital Hypothyroidism	34,384	99	642	11	11	100
Galactosemia	34,384	99	4	0	1	
Sickle Cell Disease	34,384	99	8	6	6	100
<b>Other Screening (Specify)</b>						
Biotinidase Deficiency	34,384	99	17	2	2	100
Congenital Adrenal Hyperplasia (CAH)	34,384	99	397	1	1	100
Maple Syrup Urine Disease (MSUD)	34,384	99	0	0	0	
Amino Acid Disorders	34,384	99	1	1	1	100
Urea Cycle Disorders	34,384	99	1	1	1	100
Organic Acidemias	34,384	99	0	0	0	
Fatty Acid Oxidation Disorders	34,384	99	0	0	0	

**Screening Programs for Older Children & Women (Specify Tests by name)**

- (1) Use occurrent births as denominator.  
 (2) Report only those from resident births.  
 (3) Use number of confirmed cases as denominator.

## FORM NOTES FOR FORM 6

None

### FIELD LEVEL NOTES

1. **Section Number:** Main  
**Field Name:** BirthOccurence  
**Row Name:** Total Births By Occurence  
**Column Name:** Total Births By Occurence  
**Year:** 2006  
**Field Note:**  
This number is preliminary birth data from the Nevada State Birth Registry.
2. **Section Number:** Main  
**Field Name:** Galactosemia\_TreatmentNo  
**Row Name:** Galactosemia  
**Column Name:** Needing treatment that received treatment  
**Year:** 2006  
**Field Note:**  
One case of Duarte Variant being monitored.
3. **Section Number:** Other Screening Types  
**Field Name:** Other  
**Row Name:** All Rows  
**Column Name:** All Columns  
**Year:** 2006  
**Field Note:**  
Program utilizes Tandem Mass Spectroscopy to also screen for Biotinidase Deficiency; Congenital Adrenal Hyperplasia; 5 Amino Acid Disorders (in addition to hyperphenylketonuria); 13 Organic Acid Disorders (in addition to Maple Syrup Urine Disease; and 6 Fatty Acid Oxidation Disorders.

**FORM 7**  
**NUMBER OF INDIVIDUALS SERVED (UNDUPLICATED) UNDER TITLE V**  
**(BY CLASS OF INDIVIDUALS AND PERCENT OF HEALTH COVERAGE)**

[Sec. 506(a)(2)(A)(i-ii)]

**STATE: NV**

Reporting Year: 2004

Types of Individuals Served	TITLE V	PRIMARY SOURCES OF COVERAGE				
	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	6,241	15.0	1.0	3.0	81.0	
Infants < 1 year old	34,387	15.0	1.0	55.0	29.0	
Children 1 to 22 years old	23,754	6.0	1.0	4.6	88.4	
Children with Special Healthcare Needs	2,383	43.0	3.0	43.0	11.0	
Others	14,195	12.0	0.6	19.0	68.0	
<b>TOTAL</b>	<b>80,960</b>					

FORM NOTES FOR FORM 7

The percentages for Title XIX, Title XXI, private insurance, none or unknown are derived from the percentages reported from BEIS and WCDHD. If those are not available, interpolated data is used based on Medicaid, Division of Insurance numbers, Census Bureau and whoever else may have information on who is financially covered.

FIELD LEVEL NOTES

1.

Section Number: Main

Field Name: PregWomen\_TS

Row Name: Pregnant Women

Column Name: Title V Total Served

Year: 2006

Field Note:

Add pregnant women served by WCDHD, EOB, MCH Prenatal program, WIC and UMC.

**FORM 8**  
**DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE**  
**XIX**  
**(BY RACE AND ETHNICITY)**  
[SEC. 506(A)(2)(C-D)]  
**STATE: NV**

Reporting Year: 2004

**I. UNDUPLICATED COUNT BY RACE**

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
<b>DELIVERIES</b>								
Total Deliveries in State	34,387	28,358	2,762	419	2,520	0	0	328
Title V Served	6,241	5,229	555	28	419	0	0	10
Eligible for Title XIX	11,657	9,203	1,214	108	1,050	0	0	82
<b>INFANTS</b>								
Total Infants in State	36,387	30,158	2,962	520	2,720	27	0	0
Title V Served	34,297	28,358	2,762	419	2,520	0	0	238
Eligible for Title XIX	8,377	7,012	619	100	587	7	0	52

**II. UNDUPLICATED COUNT BY ETHNICITY**

				<b>HISPANIC OR LATINO (Sub-categories by country or area of origin)</b>				
	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
<b>DELIVERIES</b>								
Total Deliveries in State	21,222	12,817	348	10,659	197	269	1,227	465
Title V Served	4,012	2,229	0	2,000	29	100	100	0
Eligible for Title XIX	7,113	4,200	0					4,200
<b>INFANTS</b>								
Total Infants in State	22,222	13,817	348					13,817
Title V Served	21,222	12,817	348					12,817
Eligible for Title XIX	5,007	3,019	52					3,019

FORM NOTES FOR FORM 8

None

FIELD LEVEL NOTES

1.

Section Number: I. Unduplicated Count By Race

Field Name: InfantsTitleXIX\_All

Row Name: Eligible for Title XIX

Column Name: Total All Races

Year: 2006

Field Note:

Total number of infants eligible for Title XIX unknown. Data is interpolated from numbers of children who have insurance and the census.

**FORM 9**  
**STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM**  
[SECS. 505(A)(E) AND 509(A)(8)]  
**STATE: NV**

	<b>FY 2006</b>	<b>FY 2005</b>	<b>FY 2004</b>	<b>FY 2003</b>	<b>FY 2002</b>
1. State MCH Toll-Free "Hotline" Telephone Number	<u>(800) 429-2669</u>	<u>(800) 429-2669</u>	<u>(800) 429-2669</u>	<u>(800) 429-2669</u>	<u>(800) 429-2669</u>
2. State MCH Toll-Free "Hotline" Name	MCH Campaign	MCH Campaign	Baby Your Baby	Baby Your Baby	Baby Your Baby
3. Name of Contact Person for State MCH "Hotline"	<u>Judith Wright</u>	<u>Judith Wright</u>	<u>Judith Wright</u>	<u>Judith Wright</u>	<u>Judith Wright</u>
4. Contact Person's Telephone Number	<u>(775) 684-4285</u>	<u>(775) 684-4285</u>	<u>(775) 684-4285</u>	<u>(775) 684-4285</u>	<u>(775) 684-4285</u>
5. Number of calls received on the State MCH "Hotline" this reporting period	<u>0</u>		<u>1,183</u>	<u>7,573</u>	<u>7,228</u>

**FORM 9**  
**STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL)**  
[SECS. 505(A)(E) AND 509(A)(8)]  
**STATE: NV**

	<b>FY 2006</b>	<b>FY 2005</b>	<b>FY 2004</b>	<b>FY 2003</b>	<b>FY 2002</b>
1. State MCH Toll-Free "Hotline" Telephone Number	<u>(866) 254-3964</u>	<u>866 254-3964</u>			
2. State MCH Toll-Free "Hotline" Name	Bureau of Family Health Services CSHCN	Bureau of Family Health Services			
3. Name of Contact Person for State MCH "Hotline"	<u>Judith Wright</u>	<u>Judith Wright</u>			
4. Contact Person's Telephone Number	<u>(775) 684-4285</u>	<u>775 684-4285</u>			
5. Number of calls received on the State MCH "Hotline" this reporting period	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>

## FORM NOTES FOR FORM 9

None

### FIELD LEVEL NOTES

1. **Section Number:** Main

**Field Name:** calls\_2

**Row Name:** Number of calls received On the State MCH Hotline This reporting period

**Column Name:** FY

**Year:** 2004

**Field Note:**

Baby Your Baby ended on 12/30/05. The MCH Campaign took over at that time. The same telephone number was kept; this remains the main MCH line. Through a partnership with Medicaid this number is part of an advertisement campaign currently starting in Southern Nevada where data indicates is the greatest need.

2. **Section Number:** Optional

**Field Name:** cnumber\_1

**Row Name:** Contact Person's telephone number

**Column Name:** FY

**Year:** 2006

**Field Note:**

This line is dedicated to CSHCN. It is being marketed through a multi-media campaign funded by the Real Choice Systems Change Grant in 2005. It is also listed on the CSHCN web site.

**FORM 10**  
**TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT**  
**STATE PROFILE FOR FY 2006**  
[SEC. 506(A)(1)]  
**STATE: NV**

1. State MCH Administration:  
(max 2500 characters)

Nevada's Title V Maternal and Child Health Program is administered through the Bureau of Family Health Services, Nevada State Health Division, Department of Health and Human Services. Programs and initiatives address areas of access to perinatal care, including preconceptual counseling, perinatal substance abuse prevention, the MCH Campaign (a multi-faceted campaign to encourage early entry into prenatal care and a medical home for infants), Children with Special Health Care Needs including CSHCN systems development, newborn screening, newborn hearing screening, birth defects registry, and multidisciplinary specialty clinics, and children and adolescents, including teen pregnancy prevention, adolescent clinics, child abuse prevention, early childhood and six to ten childhood development, and injury, rape, and oral health for the general population. The Bureau also supervises the state WIC Program and the Primary Care Development Center, which promotes access to primary care including dental care and mental health for underserved Nevadans.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ 1,976,405
3. Unobligated balance (Line 2, Form 2)	\$ 150,000
4. State Funds (Line 3, Form 2)	\$ 1,482,304
5. Local MCH Funds (Line 4, Form 2)	\$ 0
6. Other Funds (Line 5, Form 2)	\$ 0
7. Program Income (Line 6, Form 2)	\$ 0
<b>8. Total Federal-State Partnership (Line 8, Form 2)</b>	<b>\$ 3,608,709</b>

9. Most significant providers receiving MCH funds:

<u>Oregon State Public Health Laboratory</u>
<u>Washoe County District Health Department, Reno</u>
<u>Huntridge Teen Clinic, Las Vegas</u>
<u>Medical Associates South</u>

10. Individuals served by the Title V Program (Col. A, Form 7)

a. Pregnant Women	6,241
b. Infants < 1 year old	34,387
c. Children 1 to 22 years old	23,754
d. CSHCN	2,383
e. Others	14,195

11. Statewide Initiatives and Partnerships:

a. Direct Medical Care and Enabling Services:  
(max 2500 characters)

Nevada's MCH is moving away from direct services. Direct and Enabling services include Adolescent Clinics in Reno and Las Vegas through contracts with the Washoe County District Health Department (Reno) and the Huntridge Community-based Organization (Las Vegas). For CSHCN the program provided diagnosis and treatment for eligible children. Finally, MCH supports Community Health Nursing Services in Nevada's rural counties.

b. Population-Based Services:  
(max 2500 characters)

Nevada's Newborn Screening Project continued in FY 04 with 99 % of newborn in the State screened for 31 disorders. Newborn hearing screening reached 94% of infants born in mandated hospitals. Case management for children with metabolic disorders was provided through multidisciplinary metabolic clinics and the state CSHCN program. Genetic services were also provided for children in Early Intervention Services. The MCH Campaign started in FY 04. This is a multi-faceted campaign that includes a multi-media public information component to encourage early and continuous prenatal care and a medical home for the infant, a toll-free information and referral line, and contracts with local community-based providers in Reno and Las Vegas who will see pregnant women who have no insurance coverage. The State Health Division continued to be the lead agency for teen pregnancy prevention. Under this initiative the Governor's Youth Advisory Council continued to provide an assembly on abstinence for middle school-aged children.

c. Infrastructure Building Services:  
(max 2500 characters)

The State Oral Health Office, which is funded by CDC, includes surveillance as a major part of the program. It published county profiles and sealant studies in FY 04. Work continued on the Birth Defects Registry, which remained passive in FY 04 as no one applied for the position which is funded through an increase in fees for birth certificates (which also support newborn screening). The Injury Prevention initiative completed Nevada's Injury Data Surveillance Project. SSDI as in past years lead the completion of required MCH Block Grant reporting and continued development of the data warehouse in the Center for Health Data and Research (CHDR). The CHDR includes close to 30 data bases that can be linked for analysis.

12. The primary Title V Program contact person:

Name	Judith M. Wright
Title	Bureau Chief, Bureau of Family Health Services
Address	3427 Goni Road, # 108

13. The children with special health care needs (CSHCN) contact person:

Name	Gloria Deyhle, RN
Title	Health Program Specialist II, BFHS
Address	3427 Goni Road, # 108

City	Carson City
State	NV
Zip	89706
Phone	775 684-4285
Fax	775 684-4245
Email	jwright@nvhd.state.nv.us
Web	<a href="http://health2k.state.nv.us/bfhs/">http://health2k.state.nv.us/bfhs/</a>

City	Carson City
State	NV
Zip	89706
Phone	775 684-4285
Fax	775 684-4245
Email	gdeyhle@nvhd.state.nv.us
Web	<a href="http://www.health2k.state.nv.us/cshch/">http://www.health2k.state.nv.us/cshch/</a>

**FORM NOTES FOR FORM 10**

None

**FIELD LEVEL NOTES**

None

**FORM 11**  
**TRACKING PERFORMANCE MEASURES**  
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]  
**STATE: NV**

**PERFORMANCE MEASURE # 01**

The percent of newborns who are screened and confirmed with condition(s) mandated by their State-sponsored newborn screening programs (e.g. phenylketonuria and hemoglobinopathies) who receive appropriate follow up as defined by their State.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective				99	99
Annual Indicator			98.3	99.6	99.0
Numerator			32,253	33,036	34,384
Denominator			32,798	33,168	34,730
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	99	99	99	99	99
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**PERFORMANCE MEASURE # 02**

The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective				55	58
Annual Indicator			54.6	54.6	54.6
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	60	65	70	80	85
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**PERFORMANCE MEASURE # 03**

The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective				50	55
Annual Indicator			49.1	49.1	49.1
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	55	60	65	70	75
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**PERFORMANCE MEASURE # 04**

The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective				56	58
Annual Indicator			55.4	55.4	55.4
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	60	62	64	66	68
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**PERFORMANCE MEASURE # 05**

Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective				75	78
Annual Indicator			75.1	75.1	75.1
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	80	82	85	86	87
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**PERFORMANCE MEASURE # 06**

The percentage of youth with special health care needs who received the services necessary to make transition to all aspects of adult life. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective				6	10
Annual Indicator			5.8	5.8	5.8
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	5.8	10	15	20	25
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**PERFORMANCE MEASURE # 07**

Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	75	78	79	78	75
Annual Indicator	78	66.0	74.4	74.4	74.5
Numerator		28,692	33,307		31,160
Denominator		43,473	44,768		41,826
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	75	76	77	79	80
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 08**

The rate of birth (per 1,000) for teenagers aged 15 through 17 years.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	37	34	33	30	27
Annual Indicator	33.8	30.6	27.1	27.5	26.7
Numerator	1,270	1,214	1,174	1,257	1,266
Denominator	37,579	39,689	43,328	45,749	47,362
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	26	25	24	24	24
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 09**

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	40	41	42	43	38
Annual Indicator	37.5	37.5	37.5	32.5	32.5
Numerator	11,209	10,760	11,179		
Denominator	29,891	28,693	29,810		
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	38	38	38	38	38
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**PERFORMANCE MEASURE # 10**

The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	4.5	4.2	4.2	3	2
Annual Indicator	6.4	2.3	2.8	4.3	4.0
Numerator	26	10	13	21	20
Denominator	404,202	432,490	466,923	483,936	497,677
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	2.5	2.4	2.3	2.2	2
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**PERFORMANCE MEASURE # 11**

Percentage of mothers who breastfeed their infants at hospital discharge.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	53	57	57	59	63
Annual Indicator	58.3	53.0	58.3	61.2	64.8
Numerator	7,004	16,588	19,146	20,564	22,593
Denominator	12,015	31,297	32,841	33,605	34,840
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	66	67	68	69	70
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 12**

Percentage of newborns who have been screened for hearing before hospital discharge.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	25	35	80	85	94
Annual Indicator	27.2	34.5	90.8	94.3	92.5
Numerator	8,200	10,798	29,180	30,958	31,815
Denominator	30,130	31,297	32,121	32,834	34,384
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	95	96	96	97	97
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 13**

Percent of children without health insurance.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	19	20	19	19	18
Annual Indicator	22.8	21.4	19.1	19.1	17.7
Numerator	122,540	117,118	112,259	110,568	105,473
Denominator	536,407	546,068	587,695	578,890	595,895
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	18	17	17	16	14
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 14**

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	95	95	95	95	95
Annual Indicator	90	90	90	90	97.5
Numerator					95,000
Denominator					97,436
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	98	98	98	98	98
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 15**

The percent of very low birth weight infants among all live births.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	<u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>	<u>1.2</u>
Annual Indicator	<u>1.3</u>	<u>1.0</u>	<u>1.3</u>	<u>1.3</u>	<u>1.3</u>
Numerator	<u>380</u>	<u>328</u>	<u>411</u>	<u>433</u>	<u>441</u>
Denominator	<u>30,130</u>	<u>31,297</u>	<u>32,798</u>	<u>33,605</u>	<u>35,147</u>
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	<u>1.2</u>	<u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 16**

The rate (per 100,000) of suicide deaths among youths aged 15 through 19.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	<u>9</u>	<u>9</u>	<u>8</u>	<u>7</u>	<u>6</u>
Annual Indicator	<u>11.0</u>	<u>6.6</u>	<u>6.6</u>	<u>13.2</u>	<u>11.5</u>
Numerator	<u>14</u>	<u>9</u>	<u>10</u>	<u>21</u>	<u>19</u>
Denominator	<u>127,169</u>	<u>135,560</u>	<u>150,965</u>	<u>159,580</u>	<u>165,297</u>
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	<u>14</u>	<u>13</u>	<u>12</u>	<u>12</u>	<u>12</u>
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 17**

Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	95	95	95	95	95
Annual Indicator	92.6	90.9	88.1	89.8	86.6
Numerator	352	298	362	388	382
Denominator	380	328	411	432	441
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	95	95	95	95	95
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**PERFORMANCE MEASURE # 18**

Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	79	80	75	76	77
Annual Indicator	74.5	75.6	74.6	75.5	74.4
Numerator	22,447	23,645	24,468	25,362	26,157
Denominator	30,130	31,297	32,798	33,605	35,147
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	80	80	80	80	80
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 11**

The percent of women of child-bearing age who receive screening and assistance for domestic violence should be increased.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective		22	15	18	10
Annual Indicator	NaN	7.9	8.1	7.4	7.7
Numerator	0	34,727	38,003	35,814	38,229
Denominator	0	442,030	468,635	484,433	497,955
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	10	10	15	15	15
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 12**

Access to preventive oral services and dental care, regardless of ability to pay, should be increased for children, youth and women of childbearing age .

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective		1.2	1.4	1.6	1.8
Annual Indicator		0.9	1.2	1.2	1.2
Numerator		899	1,186	1,290	1,361
Denominator		986,312	1,013,750	1,047,193	1,160,930
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	1.2	1.3	1.4	1.5	1.6
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 14**

The rate of child abuse and neglect should be reduced.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective		95	4.4	4.2	4.0
Annual Indicator		4.4	4.7	5.0	3.7
Numerator		2,662	2,875	3,200	2,468
Denominator		599,079	617,887	643,516	662,975
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	3.7	3.7	3.5	3.5	3.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 16**

Pregnancy among female adolescents ages 15-19 should be reduced.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective		6.0	6.0	5.8	5
Annual Indicator		5.6	5.0	4.8	4.8
Numerator		3,663	3,638	3,720	3,787
Denominator		65,353	72,773	76,820	79,608
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	4.5	4.3	4.2	4.2	4
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 17**

Access to specialty and subspecialty services available to CSHCN should be increased.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective		155	75	82	80
Annual Indicator		65.4	82.0	68.0	62.5
Numerator		508	573	579	420
Denominator		7,769	6,989	8,519	6,724
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	65	70	75	75	75
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 18**

Increase access to enabling services that assist CSHCN in care coordination, respite care, outreach, transportation, case management, and coordination with Medicaid, Nevada Check Up, and/or purchase of health insurance .

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective		590	600	550	575
Annual Indicator		583.9	501.2	542.9	187.5
Numerator		4,536	3,503	4,625	2,224
Denominator		7,769	6,989	8,519	11,864
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	190	195	200	200	200
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 19**

Homes for primary medical care, regardless of ability to pay, should be increased for children, youth , women of child bearing age and CSHCN ages 0-19.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective		2	4	4	25
Annual Indicator		1.9	2.2	2.1	2.3
Numerator		1,559	1,768	1,768	1,970
Denominator		828,940	820,710	854,021	851,978
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	2.5	2.7	3	3	3.1
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**STATE PERFORMANCE MEASURE # 20**

Access to mental health services regardless of ability to pay for children, youth, women of child bearing age, and CSHCN, should be increased.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective		3	3.5	4	3
Annual Indicator		1.9	2.0	1.9	1.5
Numerator		1,559	1,653	1,556	1,702
Denominator		828,940	820,710	827,289	1,160,930
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	2	3	4	5	5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

## FORM NOTES FOR FORM 11

The CSHCN program has been successful in assisting families to become eligible for Medicaid and Nevada Check Up (Title XXI), thus the CSHCN active caseload has decreased. In Nevada, the active CSHCN case becomes "closed" when the child becomes eligible for the Medicaid or Nevada Check Up programs - thus there is no way of determining exactly how many CSHCN are receiving services, as those programs are unable to provide data specific to CSHCN. In addition, staff is working with the Real Choice Systems Change grant and Family Ties/Voices staff to develop increased community support services, local access to information and referral, web-site access, and provides advocacy services to enhance the availability of respite, transportation and mental health services.

### FIELD LEVEL NOTES

1. **Section Number:** Performance Measure #1  
**Field Name:** PM01  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
Information is based on data from the Nevada Newborn Screening program contract laboratory - the Oregon Public Health Laboratory, which maintains a computer database of all screening tests submitted and the results. Nevada has always had an excellent participation rate of newborns receiving at least one initial screening prior to discharge. Despite the rapid population growth in the state - hospitals and thier staff remain committed to continuing to assure all infants have a specimen taken and tested. Thus, it is anticipated that the percent of newborns receiving an initial screen will remain the same.
2. **Section Number:** Performance Measure #2  
**Field Name:** PM02  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The 2002 indicator is based on the State estimates from SLAITS.
3. **Section Number:** Performance Measure #2  
**Field Name:** PM02  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
4. **Section Number:** Performance Measure #2  
**Field Name:** PM02  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.
5. **Section Number:** Performance Measure #3  
**Field Name:** PM03  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The 2002 indicator is based on the State estimates from SLAITS.
6. **Section Number:** Performance Measure #3  
**Field Name:** PM03  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
7. **Section Number:** Performance Measure #3  
**Field Name:** PM03  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.  
  
The Real Choice Systems Change grant is being actively implemented. Linkages of CSHCN with physicians, and community programs are being developed to improve access to a medical home and coordination of services. Thus, it is anticipated that this percentage will slowly grow.
8. **Section Number:** Performance Measure #4  
**Field Name:** PM04  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The 2002 indicator is based on the State estimates from SLAITS.
9. **Section Number:** Performance Measure #4  
**Field Name:** PM04  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
10. **Section Number:** Performance Measure #4  
**Field Name:** PM04  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.

11. **Section Number:** Performance Measure #5  
**Field Name:** PM05  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
The 2002 indicator is based on the State estimates from SLAITS.
12. **Section Number:** Performance Measure #5  
**Field Name:** PM05  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
13. **Section Number:** Performance Measure #5  
**Field Name:** PM05  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.
14. **Section Number:** Performance Measure #6  
**Field Name:** PM06  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
Because only one of the States (Maine) met the NCHS standards for reliability for PM 6, the 2002 indicator is the national average except for Maine which has its State value noted.
15. **Section Number:** Performance Measure #6  
**Field Name:** PM06  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
16. **Section Number:** Performance Measure #6  
**Field Name:** PM06  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.
- The Real Choice Systems Chang grant is being implemented and various parent groups and community agencies are working together to develop and improve transition services statewide. Staff is working with the Department of Education and parents to provide technical assistance. In addition, staff has developed a web-site and participates in local publications to educate the public about available services. Thus, we anticipate gradual improvement in this area.
17. **Section Number:** Performance Measure #7  
**Field Name:** PM07  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
This data is from the state by state report: US, National Immunization Survey, Q3/2001-Q2/2002, produced by CDC.
18. **Section Number:** Performance Measure #7  
**Field Name:** PM07  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
This data comes from the CDC produced National Immunization Survey for Nevada for 7/2/2002 - 6/30/03. The numerator and denominator were not given. This data was given to the Bureau by the State's Immunization Program.
19. **Section Number:** Performance Measure #9  
**Field Name:** PM09  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
This measurement is take from a statewide dental screening of third-graders conducted in 2003. The "Miles for Smiles" mobile dental bus and Saint Marys's "Take Care A Van" traveled to selected schools throughout the state to estimate sealant prevalence. A convenience sample was selected utilizing geographic diversity and socioeconomic status.
20. **Section Number:** Performance Measure #9  
**Field Name:** PM09  
**Row Name:**  
**Column Name:**  
**Year:** 2004  
**Field Note:**  
This survey was not updated in 2004. The next screening is scheduled for FY 06.
21. **Section Number:** Performance Measure #11  
**Field Name:** PM11  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
As in years past this data represents the percent of WIC mothers breastfeeding at birth applied to the total number of births. It is hoped that data for all births will be

collected on the newborn screening lab slips in FY 04.

**22. Section Number:** Performance Measure #11

**Field Name:** PM11

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

This data is based on Newborn Screening testing data. Nevada mandates that all infants receive a newborn screening - one prior to hospital discharge and another a few weeks after discharge. Staff have been working with birthing hospitals to improve data collection on babies and on breastfeeding. Hospital staff report that this information is helpful to them in enabling them to improve their quality assurance programs in the maternal and child health area for the JCAHO survey of facilities. Nevada issued a first report to the birthing hospitals in the summer of 2005 that enables facilities to gauge how well they are doing.

**23. Section Number:** Performance Measure #12

**Field Name:** PM12

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

The Nevada Newborn Hearing Screening program has been very successful in getting newborn infants screened for hearing deficits. Problems have been encountered in assuring the follow up component. Families who have private insurance (or do not need financial assistance) rarely respond to letters sent offering CSHCN assistance. Attempts to follow up with physicians have been unsuccessful, with HIPAA being cited as the primary reason - along with the lack of time and/or funding to cover the time needed for follow up activities.

**24. Section Number:** Performance Measure #13

**Field Name:** PM13

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

See explanation in NPM 13.a.

**25. Section Number:** Performance Measure #14

**Field Name:** PM14

**Row Name:**

**Column Name:**

**Year:** 2002

**Field Note:**

Medicaid is unable to estimate total eligible population in the State, 75,396 children 0 through 19 are enrolled in Medicaid.

**26. Section Number:** Performance Measure #14

**Field Name:** PM14

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

Medicaid was unable to provide data regarding the number of potentially eligible who received a service paid by Medicaid.

They were able to indicate that 146,198 individuals under 20 years were eligible for an EPSDT exam, and that there were 109, 679 EPSDT screens completed. (There may be some duplication in this number due to the periodicity schedule).

**27. Section Number:** State Performance Measure #17

**Field Name:** SM17

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

The CSHCN program funds specialty clinics for cranio-facial abnormalities, genetics, and for metabolic disorders - thus assuring the availability of these services for CSHCN. These clinics are held at the Early Intervention clinic sites and are the "countable number".

Due to the lower CSHCN caseload (attributed to the success of getting families into the Medicaid and SCHIP programs) the "countable number" is lower. Currently, there is no way to track any additional speciality services through the Medicaid and SCHIP programs.

**28. Section Number:** State Performance Measure #18

**Field Name:** SM18

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

The CSHCN program has been successful in assisting families to become eligible for Medicaid and Nevada Check Up (Title XXI), thus the CSHCN active caseload has decreased. In Nevada, the active CSHCN case becomes "closed" when the child becomes eligible for the Medicaid or Check Up programs. There is no way of determining exactly how many CSHCN are receiving services under Medicaid or Nevada Check Up, as those programs are unable to provide data specific to CSHCN. In addition, staff is working with Real Choice Systems Change grant and Family Ties/Voices staff to develop increased community support services, local access to information and referral, web-site access, and provide advocacy services to enhance the availability of respite, transportation and mental health services.

**29. Section Number:** State Performance Measure #19

**Field Name:** SM19

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

The Annual Performance Objective for this NPM # 19 2004 should be 2.5, not 25. The system is not letting this correction be made.

**30. Section Number:** State Performance Measure #20

**Field Name:** SM20

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

Estimate as data is not available for this year but no change from 2003 is expected as no additional resources were made available.

**FORM 12**  
**TRACKING HEALTH OUTCOME MEASURES**  
[SECS 505 (A)(2)(B)(iii) AND 506 (A)(2)(A)(iii)]  
**STATE: NV**

**OUTCOME MEASURE # 01**

The infant mortality rate per 1,000 live births.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	6	6	6	6	6
Annual Indicator	6.5	5.3	6.0	5.6	6.2
Numerator	195	167	196	189	219
Denominator	30,130	31,297	32,841	33,605	35,147
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	6	6	6	6	6
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**OUTCOME MEASURE # 02**

The ratio of the black infant mortality rate to the white infant mortality rate.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	1.4	1.3	1.3	2.5	2.5
Annual Indicator	2.6	3.7	3.3	2.1	3.3
Numerator	14.22	16.5	13.1	12.1	19
Denominator	5.4	4.5	4	5.9	5.8
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	2	2	1.5	1.5	1.4
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**OUTCOME MEASURE # 03**

The neonatal mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	3.8	3.8	3	3.4	3.3
Annual Indicator	4.0	2.9	3.9	3.4	4.2
Numerator	121	91	127	115	147
Denominator	30,130	31,297	32,841	33,605	35,147
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	3.2	3.1	3	3	3
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**OUTCOME MEASURE # 04**

The postneonatal mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	2.4	2.3	2.3	2.3	2.2
Annual Indicator	2.5	2.4	2.1	2.2	2.0
Numerator	74	76	68	74	72
Denominator	30,130	31,297	32,841	33,605	35,147
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	2.2	2.2	2.1	2	2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**OUTCOME MEASURE # 05**

The perinatal mortality rate per 1,000 live births plus fetal deaths.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	9	8.5	8.5	8.5	9
Annual Indicator	9.9	8.8	11.1	11.2	5.9
Numerator	302	276	366	370	210
Denominator	30,358	31,509	33,088	33,168	35,357
Is the Data Provisional or Final?				Provisional	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	9	8	8	8	8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**OUTCOME MEASURE # 06**

The child death rate per 100,000 children aged 1 through 14.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	25	23	23	19	18
Annual Indicator	21.3	19.7	19.1	19.9	18.7
Numerator	86	85	83	90	93
Denominator	404,202	432,490	433,834	451,503	497,677
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	18	17	17	16	16
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**FORM NOTES FOR FORM 12**

None

**FIELD LEVEL NOTES**

None

**FORM 13**  
**CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS**  
**STATE: NV**

1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.

3

2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.

2

3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.

3

4. Family members are involved in service training of CSHCN staff and providers.

2

5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).

3

6. Family members of diverse cultures are involved in all of the above activities.

2

**Total Score:** 15

**Rating Key**

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

**FORM NOTES FOR FORM 13**

None

**FIELD LEVEL NOTES**

None

**FORM 14**  
**LIST OF MCH PRIORITY NEEDS**

[Sec. 505(a)(5)]

**STATE: NV FY: 2006**

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase, list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women, " and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

1. Increase access to primary care services, providers, facilities, resources, and payor sources among the MCH populations.
2. Increase access to oral health services, providers, facilities, resources, and payor sources among the MCH populations.
3. Increase access to mental health services, providers, facilities, resources, and payor sources among the MCH populations.
4. Create a unified data system and surveillance system to monitor services delivered to the MCH populations.
5. Create "braided" services for CSHCN resources in Nevada, including "one-stop-shopping" and "no wrong door".
6. Increase financial coverage and decrease financial gaps for health care including dental and mental health care among the MCH populations.
7. Decrease the incidence of domestic violence among women of childbearing age.
8. Decrease the risk factors associated with obesity for children and women.
9. Decrease unintentional injuries among the MCH populations.
- 10.

**FORM NOTES FOR FORM 14**

None

**FIELD LEVEL NOTES**

None

**FORM 15**  
**TECHNICAL ASSISTANCE(TA) REQUEST**

STATE: NV

APPLICATION YEAR: 2006

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested (max 250 characters)	Reason(s) Why Assistance Is Needed (max 250 characters)	What State, Organization or Individual Would You suggest Provide the TA (if known) (max 250 characters)
1.	<b>General Systems Capacity Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>N/A</u>	Assistance with addressing health disparities, ID the problems and ideas where to go	Nevada's minorities suffer health disparities and work is needed to address the problems	unknown
2.	<b>General Systems Capacity Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>N/A</u>	Cultural Competency Training for MCH staff	None has been done since 1999	Orvis School of Nursing, Reno, has a trainer.
3.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
4.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
5.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
6.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
7.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
9.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
10.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			

	measure number here: _____			
11.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
12.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			

**FORM NOTES FOR FORM 15**

None

**FIELD LEVEL NOTES**

None

**FORM 16**  
**STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET**  
**STATE: NV**

SP # 11

**PERFORMANCE MEASURE:**

The percent of women of child-bearing age who receive screening and assistance for domestic violence should be increased.

**STATUS:**

Active

**GOAL**

To increase domestic violence screening and assistance among women of childbearing age.

**DEFINITION**

**Numerator:**

Number of women of childbearing age who receive screening and assistance from a domestic violence shelter/agency in a year.

**Denominator:**

Number of women of childbearing age in the state in a year.

**Units:** 100    **Text:** percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

State Domestic Violence Network, State Physician Survey, Bureau of Health Planning and Vital Statistics, other domestic violence partners, police data. Data will primarily come from domestic violence shelters/agencies.

**SIGNIFICANCE**

Universal screening will promote greater awareness, knowledge, intervention, and prevention services to women and providers, as well as provide indicators for child abuse and neglect screening.

SP # 12

**PERFORMANCE MEASURE:**

Access to preventive oral services and dental care, regardless of ability to pay, should be increased for children, youth and women of childbearing age .

**STATUS:**

Active

**GOAL**

To increase access to oral/dental healthcare for children, youth and women of childbearing age.

**DEFINITION**

**Numerator:**

The number of active oral/dental providers in the State serving the MCH populations in the state.

**Denominator:**

The number of women of childbearing age, children, and youth ages 0 - 19 in the state.

**Units:** 1000 **Text:** rate per thousand

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Bureau of Health Planning and Vital Statistics, State Dental Survey, Nevada Dental Board of Examiners, State Demographer

**SIGNIFICANCE**

Oral health is a priority of the U.S. Surgeon General, and the number of available dental providers is of great concern to the state.

SP # 14

**PERFORMANCE MEASURE:**

The rate of child abuse and neglect should be reduced.

**STATUS:**

Active

**GOAL**

To reduce the number of substantiated cases of child abuse and neglect in children and youth ages 0 - 19.

**DEFINITION**

**Numerator:**

The number of substantiated cases of child abuse and neglect for children and youth 0-19.

**Denominator:**

The number of children and youth ages 0-19 in the State.

**Units:** 1000 **Text:** rate per thousand

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Bureau of Health Planning and Vital Statistics, State of Nevada Child Protection Services, Department of Child and Family Services, State Demographer

**SIGNIFICANCE**

Violence in our society is pervasive, and has the potential to change the quality of life. Children who are abused or neglected at any age are susceptible to injury, substance abuse, lower education levels and in general a poorer outcome in life due to actions or inactions of others that influence their lives.

SP # 16

**PERFORMANCE MEASURE:**

Pregnancy among female adolescents ages 15-19 should be reduced.

**STATUS:**

Active

**GOAL**

To lower the percentage of births among female adolescents ages 15-19 in the State.

**DEFINITION**

**Numerator:**

Number of live births to female adolescents ages 15-19 in the State in a calendar year.

**Denominator:**

Number of female adolescents ages 15-19 in the State in a calendar year.

**Units:** 100 **Text:** percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Bureau of Family Health Services, Bureau of Health Planning and Vital Statistics, State Demographer

**SIGNIFICANCE**

Teen pregnancy is a major threat to the mother and infant. Teen parenting is associated with lack of completion of high school for the mother and results usually in a lower economic climate in which to rear the child. Nevada has the fourth highest teen pregnancy rate in the nation for the adolescent 15-19 age group.

**PERFORMANCE MEASURE:**  
**STATUS:**  
**GOAL**  
**DEFINITION**

Access to specialty and subspecialty services available to CSHCN should be increased.  
Active  
Increase the availability of specialty and subspecialty services for CHSCN in the state.  
  
**Numerator:**  
Number of specialists and subspecialists whose practices include CSHCN in the State.  
**Denominator:**  
Number of CSHCN accessing services around the State in one year.  
**Units:** 1000    **Text:** rate per thousand

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**  
**SIGNIFICANCE**

Bureau of Health Planning and Vital Statistics, Bureau of Family Health Services, State Physician Survey  
Providing appropriate, high quality care and referrals to CSHCN is important for the well being of the child, as well as the parents. With a small number of appropriate specialists in Nevada, parents have fewer choices in where to receive the most appropriate care for their CSHCN.

SP # 18

**PERFORMANCE MEASURE:**

Increase access to enabling services that assist CSHCN in care coordination, respite care, outreach, transportation, case management, and coordination with Medicaid, Nevada Check Up, and/or purchase of health insurance .

**STATUS:**

Active

**GOAL**

To have care coordination and enabling services accessible to all CSHCN.

**DEFINITION**

**Numerator:**

The number of CSHCN served by the State CSHCN program

**Denominator:**

The number of known CSHCN in the State

**Units:** 1000 **Text:** rate per thousand

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Bureau of Health Planning and Vital Statistics, Bureau of Family Health Services, Special Children's Clinics, University of Nevada Reno statistics, Medicaid, Nevada Check Up.

**SIGNIFICANCE**

Care provided CSHCN on an emergency or "piece meal" basis is often less effective and more costly. Care coordination and enabling services have been shown to better assure access to needed services, which in turn prevent the need for more costly in-patient care, while providing more comprehensive, family-centered, and community-based care.

SP # 19

**PERFORMANCE MEASURE:**

Homes for primary medical care, regardless of ability to pay, should be increased for children, youth, women of child bearing age and CSHCN ages 0-19.

**STATUS:**

Active

**GOAL**

To have a primary care medical home for all women of childbearing age, children, youth, and CSHCN ages 0-19.

**DEFINITION**

**Numerator:**

The number of primary care providers available in the state.

**Denominator:**

The number of women of childbearing age, children and youth ages 0-19 in the State who have a medical home.

**Units:** 1000 **Text:** Rate per thousand

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Bureau of Health Planning and Vital Statistics, State Physician Survey, State Demographer

**SIGNIFICANCE**

The American Academy of Pediatrics believes that medical care should be accessible, continuous, comprehensive, family-centered, coordinated, and compassionate. It should be delivered or directed by well-trained providers who are able to manage and facilitate all aspects of care. These characteristics define the "medical home". In contrast, care provided sporadically and on an emergency basis is often less effective and more costly.

SP # 20

**PERFORMANCE MEASURE:**

Access to mental health services regardless of ability to pay for children, youth, women of child bearing age, and CSHCN, should be increased.

**STATUS:**

Active

**GOAL**

To have access to mental health services for all women of childbearing age, children, youth, and CSHCN ages 0-19.

**DEFINITION**

**Numerator:**

The number of mental health providers and services available in the State.

**Denominator:**

The number of women of childbearing age, children and youth including CHSCN ages 0-19 in the state who have access to mental health services.

**Units:** 1000 **Text:** Rate per thousand

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Bureau of Health Planning and Vital Statistics, Divison of Mental Health/Developmental Services; State Mental Health Provider Survey.

**SIGNIFICANCE**

Diagnostic, treatment, and preventive interventions designed to help improve the behavioral, physical, emotional, and social functioning of individuals with or at risk of diagnosable mental illnesses is a means of improving the mental health of all individuals by ensuring appropriate, high-quality services informed by scientific research.

**FORM NOTES FOR FORM 16**

The CSHCN program has been successful in assisting families to become eligible for Medicaid and Nevada Check Up (Title XXI), thus the CSHCN active caseload has decreased. In Nevada, the active CSHCN case becomes "closed" when the child becomes eligible for the Medicaid or Nevada Check Up programs, thus there is no way of determining exactly how many CSHCN are receiving services - as those programs are unable to provide data specific to CSHCN. In addition, staff is working with the Real Choice Systems grant staff and Family Ties/Voices of Nevada to develop increased community support services, local access to information and referral sources, and provides advocacy services to enhance the availability of respite, transportation and mental health services.

**FIELD LEVEL NOTES**

None

**FORM 17**  
**HEALTH SYSTEMS CAPACITY INDICATORS**  
**FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA**  
**STATE: NV**

**HEALTH SYSTEMS CAPACITY MEASURE # 01**

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	52.5	42.1	47.7	44.2	44.9
Numerator	720	655	761	730	752
Denominator	137,192	155,714	159,405	165,242	167,306
Is the Data Provisional or Final?				Final	Final

**HEALTH SYSTEMS CAPACITY MEASURE # 02**

The percent Medicaid enrollees whose age is less than one year during the reporting year who received at least one initial periodic screen.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	47.2	51.2	53.8	44.9	50.8
Numerator	7,412	8,721	10,354	8,919	11,337
Denominator	15,701	17,027	19,241	19,876	22,299
Is the Data Provisional or Final?				Provisional	Provisional

**HEALTH SYSTEMS CAPACITY MEASURE # 03**

The percent State Childrens Health Insurance Program (SCHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	47.2	14.5	65.4	39.5	37.2
Numerator	219	192	540	5,541	3,064
Denominator	464	1,328	826	14,035	8,238
Is the Data Provisional or Final?				Provisional	Provisional

**HEALTH SYSTEMS CAPACITY MEASURE # 04**

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	69.7	70.6	78.5	80.5	75.9
Numerator	20,934	22,001	24,156	26,957	26,581
Denominator	30,015	31,163	30,767	33,468	35,022
Is the Data Provisional or Final?				Final	Final

**HEALTH SYSTEMS CAPACITY MEASURE # 07**

The percent of EPSDT eligible children aged 6 through 9 years who have received any dental services during the year.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	27.6	28.4	22.7	15.7	15.6
Numerator	5,340	5,930	5,618	6,517	5,357
Denominator	19,353	20,859	24,784	41,429	34,278
Is the Data Provisional or Final?				Final	Provisional

**HEALTH SYSTEMS CAPACITY MEASURE # 08**

The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	18.1	23.1	20.6	20.5	20.5
Numerator	626	863	638	953	1,054
Denominator	3,450	3,730	3,100	4,653	5,140
Is the Data Provisional or Final?				Provisional	Provisional

## FORM NOTES FOR FORM 17

Exact data not available from HCPF. Number of infants <1 year is based on Medicaid data that indicates approximately 12.4% of children are < 1 year. Thus, total number of SCHIP enrollees x 12.4% is the total number of infants < 1 year. Same number applied to the total number of children who received a medical service.

### FIELD LEVEL NOTES

1. **Section Number:** Health Systems Capacity Indicator #03

**Field Name:** HSC03

**Row Name:**

**Column Name:**

**Year:** 2002

**Field Note:**

SCHIP was able to provide estimates for this measure this year from their managed care programs. Does not include Fee For Service children, managed care is about 89.5% of SCHIP population. Different method used last year to calculate rate, data from SCHIP program preferred method but unavailable in 2001.

2. **Section Number:** Health Systems Capacity Indicator #03

**Field Name:** HSC03

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

This data comes from the Division of Health Care Financing and Policy. Their data systems over the years have not been as reliable as they could have been. The Health Division reports what DHCFP provides.

3. **Section Number:** Health Systems Capacity Indicator #03

**Field Name:** HSC03

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

This data is from Nevada's S-CHIP office. It cannot be validated.

4. **Section Number:** Health Systems Capacity Indicator #07

**Field Name:** HSC07

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

Data is not available for 1999, so zeros were used in order to save this measure.

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #05**  
**(MEDICAID AND NON-MEDICAID COMPARISON)**  
**STATE: NV**

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) Percent of low birth weight (< 2,500 grams)	2004	Other	<u>7.4</u>	<u>8.5</u>	<u>8</u>
b) Infant deaths per 1,000 live births	2004	Other	<u>5.6</u>	<u>6.8</u>	<u>6.2</u>
c) Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester	2004	Other	<u>85.6</u>	<u>65</u>	<u>74.4</u>
d) Percent of pregnant women with adequate prenatal care (observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])	2004	Other	<u>88.2</u>	<u>62.9</u>	<u>75.9</u>

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #06 (MEDICAID ELIGIBILITY LEVEL)**  
**STATE: NV**

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL MEDICAID (Valid range: 100-300 percent)
a) Infants (0 to 1)	2004	<u>133</u>
b) Medicaid Children (Age range <u>1</u> to <u>5</u> ) (Age range <u>6</u> to <u>18</u> ) (Age range <u>      </u> to <u>      </u> )	2004	<u>133</u> <u>100</u> <u>      </u>
c) Pregnant Women	2004	<u>133</u>

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #06 (SCHIP ELIGIBILITY LEVEL)**  
**STATE: NV**

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL SCHIP
a) Infants (0 to 1)	2004	<u>200</u>
b) Medicaid Children (Age range <u>1</u> to <u>18</u> ) (Age range <u>      </u> to <u>      </u> ) (Age range <u>      </u> to <u>      </u> )	2004	<u>200</u> <u>      </u> <u>      </u>
c) Pregnant Women	2004	<u>200</u>

## FORM NOTES FOR FORM 18

None

### FIELD LEVEL NOTES

1. **Section Number:** Indicator 06 - SCHIP  
**Field Name:** SCHIP\_Women  
**Row Name:** Pregnant Women  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Pregnant women are served only if they are under 18.
2. **Section Number:** Indicator 05  
**Field Name:** LowBirthWeight  
**Row Name:** Percent of ow birth weight (<2,500 grams)  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Medicaid and Non-Medicaid numbers are estimated based on the percentage of the state overall number and ratio of last year due to the Medicaid data is unavailable.
3. **Section Number:** Indicator 05  
**Field Name:** InfantDeath  
**Row Name:** Infant deaths per 1,000 live births  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Medicaid and Non-Medicaid numbers are estimated based on the percentage of the state overall number and ratio of last year due to the Medicaid data is unavailable.
4. **Section Number:** Indicator 05  
**Field Name:** CareFirstTrimester  
**Row Name:** Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Medicaid and Non-Medicaid numbers are estimated based on the percentage of the state overall number and ratio of last year due to the Medicaid data is unavailable.
5. **Section Number:** Indicator 05  
**Field Name:** AdequateCare  
**Row Name:** Percent of pregnant women with adequate prenatal care  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Medicaid and Non-Medicaid numbers are estimated based on the percentage of the state overall number and ratio of last year due to the Medicaid data is unavailable.

**FORM 19**  
**HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM**  
**STATE: NV**

**HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)**  
*(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Information)*

<b>DATABASES OR SURVEYS</b>	<b>Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *</b>	<b>Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)</b>
<b>ANNUAL DATA LINKAGES</b>		
Annual linkage of infant birth and infant death certificates	3	Yes
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	2	Yes
Annual linkage of birth certificates and WIC eligibility files	2	Yes
Annual linkage of birth certificates and newborn screening files	2	Yes
<b>REGISTRIES AND SURVEYS</b>		
Hospital discharge survey for at least 90% of in-State discharges	3	Yes
Annual birth defects surveillance system	3	Yes
Survey of recent mothers at least every two years (like PRAMS)	2	Yes

\*Where:  
1 = No, the MCH agency does not have this ability.  
2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.  
3 = Yes, the MCH agency always has this ability.

**FORM 19**  
**HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM**  
**STATE: NV**

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	Yes
Other:		

**HEALTH SYSTEMS CAPACITY INDICATOR #09C (Data Capacity) Overweight/Obesity**  
*(The Ability of the State to Determine the Percent of Children Who are Obese or Overweight)*

Data Source	Does your state participate in this survey/data source? (Select 1 - 3)*	Does your MCH program have direct access to this electronic database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	Yes
Pediatric Nutrition Surveillance System (PedNSS)	3	No
WIC Program Data	3	Yes
Other:		

\*Where:  
1 = No  
2 = Yes, the State participates but the sample size is not large enough for valid statewide estimates for this age group.  
3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

**Notes:**

1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

## FORM NOTES FOR FORM 19

None

### FIELD LEVEL NOTES

1. **Section Number:** Indicator 09A

**Field Name:** BirthDefects

**Row Name:** Annual birth defects surveillance system

**Column Name:**

**Year:** 2006

**Field Note:**

During calendar year 2004, Nevada did not have an "active" component to its Birth Defects Registry, only the "passive" component.

Recruitment of approximately six months (including newspaper advertising) brought only one qualified applicant. The applicant was finally interviewed and the process is moving forward toward hiring an FTE for the position.

**FORM 20**  
**HEALTH STATUS INDICATORS #01-#05**  
**MULTI-YEAR DATA**  
**STATE: NV**

**HEALTH STATUS INDICATOR MEASURE # 01A**

The percent of live births weighing less than 2,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	7.2	7.6	7.5	8.0	8.0
Numerator	2,170	2,372	2,436	2,704	2,799
Denominator	30,130	31,297	32,423	33,605	35,147
Is the Data Provisional or Final?				Final	Final

**HEALTH STATUS INDICATOR MEASURE # 01B**

The percent of live singleton births weighing less than 2,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	5.7	5.9	5.8	6.3	6.4
Numerator	1,659	1,788	1,836	2,034	2,189
Denominator	29,278	30,331	31,460	32,523	34,167
Is the Data Provisional or Final?				Final	Final

**HEALTH STATUS INDICATOR MEASURE # 02A**

The percent of live births weighing less than 1,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	1.3	1.0	1.3	1.3	1.3
Numerator	380	328	411	432	441
Denominator	30,130	31,297	32,423	33,605	35,147
Is the Data Provisional or Final?				Final	Final

**HEALTH STATUS INDICATOR MEASURE # 02B**

The percent of live singleton births weighing less than 1,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	0.9	0.8	1.0	1.0	1.0
Numerator	275	232	305	317	329
Denominator	29,278	30,331	31,460	32,523	34,165
Is the Data Provisional or Final?				Final	Final

**HEALTH STATUS INDICATOR MEASURE # 03A**

The death rate per 100,000 due to unintentional injuries among children aged 14 years and younger.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	12.3	8.0	8.8	10.5	9.4
Numerator	53	36	41	51	47
Denominator	430,416	449,993	466,923	483,936	497,677
Is the Data Provisional or Final?				Final	Final

**HEALTH STATUS INDICATOR MEASURE # 03B**

The death rate per 100,000 for unintentional injuries among children aged 14 years and younger due to motor vehicle crashes.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	7.2	2.2	3.2	4.3	4.0
Numerator	31	10	15	21	20
Denominator	430,416	449,993	466,923	483,936	497,677
Is the Data Provisional or Final?				Final	Final

**HEALTH STATUS INDICATOR MEASURE # 03C**

The death rate per 100,000 from unintentional injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	20.2	18.7	26.4	26.4	22.0
Numerator	57	55	81	86	74
Denominator	282,737	293,743	306,509	325,780	336,900
Is the Data Provisional or Final?				Final	Final

**HEALTH STATUS INDICATOR MEASURE # 04A**

The rate per 100,000 of all nonfatal injuries among children aged 14 years and younger.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	168.0	178.7	169.2	229.7	232.5
Numerator	723	804	790	1,110	1,157
Denominator	430,416	449,993	466,923	483,302	497,677
Is the Data Provisional or Final?				Final	Final

**HEALTH STATUS INDICATOR MEASURE # 04B**

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among children aged 14 years and younger.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	73.6	74.4	74.5	32.9	18.1
Numerator	317	335	348	159	90
Denominator	430,416	449,993	466,923	483,302	497,677
Is the Data Provisional or Final?				Provisional	Final

**HEALTH STATUS INDICATOR MEASURE # 04C**

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	230.6	265.9	304.1	103.6	97.1
Numerator	652	781	932	330	327
Denominator	282,737	293,743	306,509	318,606	336,900
Is the Data Provisional or Final?				Provisional	Final

**HEALTH STATUS INDICATOR MEASURE # 05A**

The rate per 1,000 women aged 15 through 19 years with a reported case of chlamydia.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	21.3	22.6	24.7	22.7	20.2
Numerator	1,329	1,477	1,795	1,710	1,612
Denominator	62,388	65,353	72,773	75,305	79,608
Is the Data Provisional or Final?				Final	Final

**HEALTH STATUS INDICATOR MEASURE # 05B**

The rate per 1,000 women aged 20 through 44 years with a reported case of chlamydia.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	4.5	3.1	7.1	5.9	7.4
Numerator	1,656	1,193	2,382	2,421	3,103
Denominator	365,261	387,233	335,971	407,612	418,348
Is the Data Provisional or Final?				Final	Final

## FORM NOTES FOR FORM 20

None

### FIELD LEVEL NOTES

1. **Section Number:** Health Status Indicator #04A  
**Field Name:** HSI04A  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
This measure has been improved by considering inpatient hospitalizations with codes consistent with injuries despite a lack of type of injury code (e-code) being provided thanks to help from Research Applications. Research Applications is working with our Injury Prevention Program on improving injury surveillance data quality.
2. **Section Number:** Health Status Indicator #04A  
**Field Name:** HSI04A  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Data for all nonfatal injuries, aged 14 years and younger, are from Hospital Discharge database. Data are for all "E-Codes" listed in any of the 15 diagnoses. The increase in 2003 may be due to some hospitals changing their "E-Code" reporting system. Therefore, 2003 data may not be comparable to previous years.
3. **Section Number:** Health Status Indicator #04B  
**Field Name:** HSI04B  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
This measure has been improved by considering only Type 'A' or Type 'B' injuries from the Department of Transportation based on recommendations from Research Applications. Research Applications is working with our Injury Prevention Program on improving injury surveillance data quality.
4. **Section Number:** Health Status Indicator #04B  
**Field Name:** HSI04B  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Data comes from Trauma Registry database due to under-reporting and inconsistencies in Hospital Discharge data. Actual data for motor vehicle, non-fatal injuries among children 14 years and younger may be higher. Data are for E-codes 810-825.
5. **Section Number:** Health Status Indicator #04C  
**Field Name:** HSI04C  
**Row Name:**  
**Column Name:**  
**Year:** 2002  
**Field Note:**  
This measure has been improved by considering only Type 'A' or Type 'B' injuries from the Department of Transportation based on recommendations from Research Applications. Research Applications is working with our Injury Prevention Program on improving injury surveillance data quality.
6. **Section Number:** Health Status Indicator #04C  
**Field Name:** HSI04C  
**Row Name:**  
**Column Name:**  
**Year:** 2003  
**Field Note:**  
Data comes from Trauma Registry database due to under-reporting and inconsistencies in Hospital Discharge data. Actual data for motor vehicle, non-fatal injuries among youths aged 15 through 24 years may be higher. Data are for E-codes 810-825.

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: NV**

**HSI #06A - Demographics (Total Population)** *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and race. (Demographics)*

For both parts A and B: Reporting Year: 2004    Is this data from a State Projection? No    Is this data final or provisional? Provisional

<b>CATEGORY TOTAL POPULATION BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Infants 0 to 1	34,731	17,059	2,858	448	2,017			12,349
Children 1 through 4	132,576	63,037	10,984	1,693	8,656			48,206
Children 5 through 9	164,802	83,183	13,000	2,298	10,021			56,300
Children 10 through 14	165,568	89,179	15,289	2,524	9,053			49,523
Children 15 through 19	165,297	89,065	14,674	2,710	9,319			49,529
Children 20 through 24	171,603	93,107	12,842	2,630	10,815			52,209
Children 0 through 24	834,577	434,630	69,647	12,303	49,881	0	0	268,116

**HSI #06B - Demographics (Total Population)** *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)*

<b>CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Infants 0 to 1	22,382	12,349	
Children 1 through 4	84,370	48,206	
Children 5 through 9	108,502	56,300	
Children 10 through 14	116,045	49,523	
Children 15 through 19	115,768	49,529	
Children 20 through 24	119,394	52,209	
Children 0 through 24	566,461	268,116	0

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: NV**

**HSI #07A - Demographics (Total live births)** *Live births to women (of all ages) enumerated by maternal age and race. (Demographics)*

For both parts A and B: Reporting Year: 2004    Is this data from a State Projection? No    Is this data final or provisional? Provisional

<b>CATEGORY TOTAL LIVE BIRTHS BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Women < 15	67	8	11	0	2			46
Women 15 through 17	1,260	330	152	14	51			713
Women 18 through 19	2,504	924	280	42	88			1,170
Women 20 through 34	26,565	12,242	2,090	330	1,894			10,009
Women 35 or older	4,430	2,297	239	45	498			1,351
Women of all ages	34,826	15,801	2,772	431	2,533	0	0	13,289

**HSI #07B - Demographics (Total live births)** *Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)*

<b>CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Women < 15	21	45	1
Women 15 through 17	547	697	16
Women 18 through 19	1,334	1,149	21
Women 20 through 34	16,556	9,775	234
Women 35 or older	3,079	1,296	55
Women of all ages	21,537	12,962	327

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: NV**

**HSI #08A - Demographics (Total deaths)** Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race. (Demographics)

For both parts A and B: Reporting Year: 2004    Is this data from a State Projection? No    Is this data final or provisional? Provisional

<b>CATEGORY TOTAL DEATHS BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Infants 0 to 1	219	92	53	3	13			58
Children 1 through 4	39	23	2	0	4			10
Children 5 through 9	11	5	2	0	1			3
Children 10 through 14	43	30	5	0	1			7
Children 15 through 19	119	63	17	3	4			32
Children 20 through 24	159	70	19	4	8			58
Children 0 through 24	590	283	98	10	31	0	0	168

**HSI #08B - Demographics (Total deaths)** Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

<b>CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Infants 0 to 1	161	58	
Children 1 through 4	29	10	
Children 5 through 9	8	3	
Children 10 through 14	36	7	
Children 15 through 19	87	32	
Children 20 through 24	101	58	
Children 0 through 24	422	168	0

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: NV**

**HSI #09A - Demographics (Miscellaneous Data)** *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)*

Is this data final or provisional? Provisional

<b>CATEGORY Miscellaneous Data BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>	<b>Specific Reporting Year</b>
All children 0 through 19	662,974	341,523.0	56,805.0	9,673.0	39,065.0			215,908.0	2004
Percent in household headed by single parent	9.6							9.6	2004
Percent in TANF (Grant) families	0.4							100.0	2004
Number enrolled in Medicaid	210,559							210,559.0	2004
Number enrolled in SCHIP	39,416							39,416.0	2004
Number living in foster home care	5,849							5,849.0	2004
Number enrolled in food stamp program	57,781	38,152.0	15,788.0	906.0	1,722.0	146.0	1,063.0	4.0	2004
Number enrolled in WIC	538,856	119,295.0	60,572.0	3,204.0	14,550.0	4,727.0	12,191.0	324,317.0	2004
Rate (per 100,000) of juvenile crime arrests	3,993.0							3,993.0	2004
Percentage of high school drop-outs (grade 9 through 12)	6.0							6.0	2004

**HSI #09B - Demographics (Miscellaneous Data)** *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)*

<b>CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>	<b>Specific Reporting Year</b>
All children 0 through 19	447,066.0	215,908.0		2004
Percent in household headed by single parent			9.6	2004
Percent in TANF (Grant) families			100.0	2004
Number enrolled in Medicaid			210,559.0	2004
Number enrolled in SCHIP			39,416.0	2004
Number living in foster home care			5,849.0	2004
Number enrolled in food stamp program	46,703.0	11,074.0	4.0	2004
Number enrolled in WIC	214,543.0	324,313.0		2004
Rate (per 100,000) of juvenile crime arrests			3,993.0	2004
Percentage of high school drop-outs (grade 9 through 12)			6.0	2004

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: NV**

**HSI #10 - Demographics (Geographic Living Area)** *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*

Reporting Year: 2004    Is this data from a State Projection? No    Is this data final or provisional? Provisional

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	28,016
Living in urban areas	583,066
Living in rural areas	21,855
Living in frontier areas	30,037
<b>Total - all children 0 through 19</b>	<b>634,958</b>

**Note:**

The Total will be determined by adding reported numbers for urban, rural and frontier areas.

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: NV**

**HSI #11 - Demographics (Poverty Levels)** *Percent of the State population at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2004    Is this data from a State Projection? No    Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Total Population	2,366,313.0
Percent Below: 50% of poverty	7.1
100% of poverty	10.9
200% of poverty	30.9

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: NV**

**HSI #12 - Demographics (Poverty Levels)** *Percent of the State population aged 0 through 19 at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2004    Is this data from a State Projection? No    Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	662,974.0
Percent Below: 50% of poverty	6.0
100% of poverty	14.8
200% of poverty	40.4

## FORM NOTES FOR FORM 21

None

### FIELD LEVEL NOTES

1. **Section Number:** Indicator 09A  
**Field Name:** HSIRace\_SingleParentPercent  
**Row Name:** Percent in household headed by single parent  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data comes from census bureau (for Nevada stats). This item is not broken down by race.
2. **Section Number:** Indicator 09A  
**Field Name:** HSIRace\_TANFPercent  
**Row Name:** Percent in TANF (Grant) families  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
This data comes from the Administration for Children and Families, Office of Family Assistance. Their data (on the Internet) states that for Nevada, 16,426 children were on TANF. The .4% comes by dividing the 16,426 by the total # of children 0 - 19 in the state (662,974).
3. **Section Number:** Indicator 09A  
**Field Name:** HSIRace\_JuvenileCrimeRate  
**Row Name:** Rate (per 100,000) of juvenile crime arrests  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
This data comes from the state demographer (denominator) and the State Department of Public Safety's 2004 report on number of arrests (Crime in Nevada 2004) (numerator).
4. **Section Number:** Indicator 09A  
**Field Name:** HSIRace\_DropOutPercent  
**Row Name:** Percentage of high school drop-outs (grade 9 through 12)  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
This data is from the State Department of Education for the 2002-2003 school year. It cannot be verified. Nevada Kid's County for 2004 (for thte 2001-2002 school year) reports 6.3%, ranging from 0.5 in Douglas County to 11.6% in Storey County.
5. **Section Number:** Indicator 09A  
**Field Name:** HSIRace\_FosterCare  
**Row Name:** Number living in foster home care  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
This data is obtained from the Division of Child and Family Services. They state they do not track the number of foster children by race or ethnicity - only the number.
6. **Section Number:** Indicator 09B  
**Field Name:** HSIEthnicity\_FosterCare  
**Row Name:** Number living in foster home care  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
The Division of Child & Family Services does not track foster children by ethnicity or race.

**NEW STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET**  
**STATE: NV**

SP # 1

**PERFORMANCE MEASURE:**

The percent of women of child-bearing age who receive screening and assistance for domestic violence should be increased.

**GOAL**

To increase domestic violence screening and assistance among women of childbearing age.

**DEFINITION**

**Numerator:**

Number of women of childbearing age (age 15-44) who receive screening and assistance from a domestic violence shelter/agency in a year.

**Denominator:**

Number of women of childbearing age in the state during the year.

**Units:** 100 **Text:** 1

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

State Domestic Violence Network, State Physician Survey, Bureau of Health Planning and Vital Statistics, other domestic violence partners, police data, clinics and county health department. Data will primarily come from domestic violence shelters/agencies and contracts with the bureau for MCH services.

**SIGNIFICANCE**

Universal screening will promote greater awareness, knowledge, intervention, and prevention services to women and providers, as well as provide indicators for child abuse and neglect screening.

**OBJECTIVE**

2006	2007	2008	2009	2010
10	15	15	15	20

SP # 2

**PERFORMANCE MEASURE:**

Access to preventive oral health services for the Medicaid population of children, youth and women of childbearing age (15-44) should be increased.

**GOAL**

**DEFINITION**

**Numerator:**

The number of oral health services providers received payment of \$1,000 or more from the Medicaid during the year.

**Denominator:**

The number of children, youth and women of childbearing age in the Medicaid population during the year.

**Units:**    **Text:** 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

**SIGNIFICANCE**

**OBJECTIVE**

2006	2007	2008	2009	2010
0.88	0.89	0.9	0.91	0.92

SP # 3

PERFORMANCE MEASURE:

The percent of Obese women ages 18 to 44 should be decreased.

GOAL

DEFINITION

**Numerator:**  
Women ages 18 to 44 in the Behavioral Risk Factor Surveillance System (BRFSS) with Body Mass Index (BMI) greater than 3000.  
**Denominator:**  
All women ages 18 to 44 in the Behavioral Risk Factor Surveillance System (BRFSS).  
**Units:**   **Text:** 0

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Behavioral Risk Factor Surveillance System (BRFSS)

SIGNIFICANCE

OBJECTIVE

2006	2007	2008	2009	2010
16	16	16	15	15

SP # 4

**PERFORMANCE MEASURE:** Teen birth rate (per 1,000) among Hispanic adolescents ages 15-17 should be reduced.

**GOAL**

**DEFINITION**

**Numerator:**  
The number of Hispanic female ages 15-17 who give birth during the year.  
**Denominator:**  
The number of Hispanic female ages 15-17 in the state during the year.  
**Units:**    **Text:** 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES** State birth certificates, Center for Health Data and Research database.

**SIGNIFICANCE**

**OBJECTIVE**

2006	2007	2008	2009	2010
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SP # 5

**PERFORMANCE MEASURE:**  
**GOAL**  
**DEFINITION**

All infants born in the state will have a newborn hearing screening prior to discharge from the hospital.

**Numerator:**  
All infants born in the state who received newborn hearing screening prior to discharge from the hospital during the year.  
**Denominator:**  
The total number of infants born in the state during the year.  
**Units:**    **Text:** 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**  
**SIGNIFICANCE**  
**OBJECTIVE**

State birth certificates, Center for Health Data and Research database. Data from all hospitals in the state.

2006	2007	2008	2009	2010
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SP # 6

**PERFORMANCE MEASURE:**

The percent of children and youth ages birth through aged 18 who died from unintentional injuries should be decreased.

**GOAL**

**DEFINITION**

**Numerator:**

The number of children in Nevada from birth through 18 who died from an unintentional injury.

**Denominator:**

The number of children in Nevada from birth through 18 years of age.

**Units:**   **Text:** 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Injury prevention database, Bureau of Health Planning and Vital Statistics and the State Demographers Office.

**SIGNIFICANCE**

Reducing the number of deaths from unintentional injuries in children will increase the quality of life for children and families. This is a population based and infrastructure-building services measure.

**OBJECTIVE**

2006	2007	2008	2009	2010
0.8	0.8	0.8	0.8	0.8

SP # 7

**PERFORMANCE MEASURE:**

Increase the ratio of primary care providers to the number of children and youth ages birth to twenty-one and women of child bearing age.

**GOAL**

**DEFINITION**

**Numerator:**

**Denominator:**

**Units:**   **Text:** 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

**SIGNIFICANCE**

**OBJECTIVE**

2006	2007	2008	2009	2010
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SP # 8

**PERFORMANCE MEASURE:**

The percent of women (18-44) who feel down or depressed should be decreased.

**GOAL**

**DEFINITION**

**Numerator:**

Women ages 18 to 44 who feel down or depressed in the Behavioral Risk Factor Surveillance System (BRFSS).

**Denominator:**

All women ages 18 to 44 in the Behavioral Risk Factor Surveillance System (BRFSS).

**Units:** Text: 0

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Behavioral Risk Factor Surveillance System

**SIGNIFICANCE**

**OBJECTIVE**

2006	2007	2008	2009	2010
30	30	30	29	28

